

ADMINISTRATIVE OFFICE OF THE UNITED STATES COURTS

PART 1 (JUDGE'S REPORT) REPORT OF APPLICATION AND/OR ORDER AUTHORIZING INTERCEPTION OF COMMUNICATIONS *(To be completed upon approval or denial of application pursuant to 18 U.S.C. 2519(1))*

1. JUDGE AUTHORIZING OR DENYING THE APPLICATION

Judge's Name:	County/Court/District/Jurisdiction:	Court Reference No.:
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2. SOURCE – OFFICIAL MAKING APPLICATION

Official's Name:	Title: <i>(i.e., AUSA, DA, etc.)</i>	Jurisdiction/Agency:	Telephone No.:
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3. PROSECUTION OFFICIAL AUTHORIZING APPLICATION

Prosecutor or DAAG Name:	District/Jurisdiction:	Prosecutor Reference No.:	Telephone No.:
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3A. LAW ENFORCEMENT AGENCY CONDUCTING THE WIRETAP

Agency's Name: <i>(FBI, DEA, Sheriff, etc.)</i>	Contact Person:	Telephone No.:	Agency Reference No.:
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4. OFFENSE *(MOST SERIOUS)*

5. TYPE OF ORDER *(Check Ordinary or Roving Order)*

Description <i>(e. g., Narcotics, Gambling)</i>	<input type="checkbox"/> Ordinary <i>(Routine)</i> Specification Order <input type="checkbox"/> Roving – Relaxed Specification Order under 18 U.S.C. 2518 (11) <i>(ALSO CHECK "NO LOCATION SPECIFIED" IN ITEM 8, BELOW)</i>
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6. DURATION OF INTERCEPT

Order or Extension	No. of Days	Date of Application	Check One Denied Granted	Date Order Denied or Granted	Was this Order/Extension Granted with Modification or Amendment? <i>(Check only if "Yes")</i>
ORIGINAL REQUEST					<input type="checkbox"/> Modified/amended – DATE:
1 st Extension					<input type="checkbox"/> Modified/amended – DATE:
2 nd Extension					<input type="checkbox"/> Modified/amended – DATE:
3 rd Extension					<input type="checkbox"/> Modified/amended – DATE:
List additional extensions on separate sheet	TOTAL NUMBER OF EXTENSIONS:			TOTAL DAYS AUTHORIZED:	

7. TYPE OF INTERCEPT *(Check all that apply to this order/authorization)*

<input type="checkbox"/> WIRE INTERCEPT OF PHONE COMMUNICATIONS – check device(s) <input type="checkbox"/> Cellular or mobile telephone <input type="checkbox"/> Standard Telephone <i>(land line)</i> <input type="checkbox"/> Other type of telephone communication device <i>(specify)</i> _____	<input type="checkbox"/> ORAL – check device(s) <input type="checkbox"/> Microphone / Eavesdrop <input type="checkbox"/> Other type <i>(specify)</i> _____	<input type="checkbox"/> ELECTRONIC – check device(s) <input type="checkbox"/> Computer <i>(including E-mail)</i> <input type="checkbox"/> Digital pager <input type="checkbox"/> Fax machine <input type="checkbox"/> Text messaging <input type="checkbox"/> Other electronic device <i>(specify)</i> _____
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8. LOCATION SHOWN IN INTERCEPT ORDER *(Check all that apply to this order/authorization)*

<input type="checkbox"/> PERSONAL RESIDENCE <i>(specify)</i> _____ <i>(e.g., single family house, apartment, mobile home, rooming house, dormitory)</i>	<input type="checkbox"/> PORTABLE DEVICE - CARRIED BY/ON INDIVIDUAL <i>(specify)</i> _____ <i>(e.g., cell phone, pager)</i>
<input type="checkbox"/> BUSINESS <i>(specify)</i> _____ <i>(e.g., store, office, restaurant, gym, hospital, school)</i>	<input type="checkbox"/> OTHER LOCATION <i>(specify)</i> _____ <i>(e.g., motel, prison, jail, vehicle, another specified location not listed)</i>
<input type="checkbox"/> PUBLIC AREA <i>(specify)</i> _____ <i>(e.g., pay telephone, park, station, airport, library, street, cemetery)</i>	<input type="checkbox"/> NO LOCATION SPECIFIED IN ORDER <i>(specify)</i> _____ <i>(either "roving" as shown in item 5, or other circumstances. Describe.)</i>

Judge's signature:	Telephone No.:	Date:
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INSTRUCTIONS

When Part 1 (Judge's Report) is completed, do the following:

- (1) Send a copy to one of the following:

Mail - Administrative Office of the U.S. Courts, Attn: Statistics Division (WT),
 One Columbus Circle, NE, Washington, DC 20544
 Fax - 202-502-1422
 E-mail - SD-Wiretap@AO.USCOURTS.GOV
- (2) Provide the Form WT-2 to the official making the application
- (3) Retain a copy for the judge's files

Report Prepared By:	Telephone No.. <i>(Area Code)</i>
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ADMINISTRATIVE OFFICE OF THE UNITED STATES COURTS**PART 2 (PROSECUTOR'S REPORT)****REPORT OF APPLICATION AND/OR ORDER****AUTHORIZING INTERCEPTION OF COMMUNICATIONS***(To be completed upon termination of investigation pursuant to 18 U.S.C. 2519(2))***JUDGE AUTHORIZING OR DENYING THE APPLICATION****LAW ENFORCEMENT AGENCY**

Judge's Name:	County/Court/District/Jurisdiction:	Agency Reference No.:
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PROSECUTION OFFICIAL AUTHORIZING APPLICATION

Prosecutor or DAAG Name:	Prosecutor Reference No.:	Telephone No.:
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NOTE: Items listed above should match information entered on Part 1 of Form WT-2.

9. INSTALLATION
☐ NEVER INSTALLED *(Skip Items 10 through 12)*
☐ INSTALLED BUT NOT USED *(Skip to Item 11)*
☐ INSTALLED AND USED *(Complete Form)*
10. DESCRIPTION OF INTERCEPTS

10A. Termination Date of Interception	10B. No. of Days in Actual Use	10C. No. of Communications Intercepted	10D. No. of Persons Whose Communications were Intercepted	10E. No. of Incriminating Communications Intercepted
10F. Was Encryption Encountered in this Wiretap? <input type="checkbox"/> Yes <input type="checkbox"/> No			10G. If Yes, Did Encryption prevent Law Enforcement from Obtaining the Plain Text of Communications Interception? <input type="checkbox"/> Yes <input type="checkbox"/> No	

11. COST

Check if Applicable: <input type="checkbox"/> Costs for this wiretap are not reported here, but are shown on Reference Number(s): _____				
11A. Nature and Quantity of Personnel Used to Install, Monitor, and Prepare Transcripts :	11B. Personnel Cost <i>(Round to Nearest Dollar):</i> \$	+	11C. Resource Cost installation fees, supplies, equipment, etc. <i>(Round to Nearest Dollar):</i> \$	= 11D. Total Cost = Personnel + Resource <i>(Round to Nearest Dollar):</i> \$

12. RESULTS☐ Check here if case is pending and there are no results to report *(results not reported here should be reported on the WT-3 Supplementary Report)*

Check if Applicable: <input type="checkbox"/> Arrests for this wiretap are not reported here, but are shown on Reference Number: _____						
12A. No. of Persons Arrested	12B. No. of Motions to Suppress Granted	Denied	Pending	12C. No. of Persons Convicted	12D. No. of Trials Completed	12E. Conviction Offense

13. COMMENTS AND ASSESSMENTDescribe importance of the interceptions, drugs and money seizure amounts, impact on crime or community etc. **DO NOT** include target's names, addresses, phone numbers, name of gangs, or other sensitive information.

Signature of Authorizing Prosecutor:	Telephone No.:	Date:
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INSTRUCTIONS

When Part 2 (Prosecutor's Report) is completed,

(1) Make copies for your files

(2) States Only - send completed originals of Part 1 and Part 2 to one of the following:

Mail - Administrative Office of the U.S. Courts, Attn: Statistics Division (WT),
One Columbus Circle, NE, Washington, DC 20544

Fax - 202-502-1422

E-mail - SD-Wiretap@AO.USCOURTS.GOV

(2A) Federal Only - submit completed copy of Part 1 and Part 2 to: Federal Law Enforcement Agency Contact Official

(3) Federal Law Enforcement Agency Contact Official - send completed Part 1 and Part 2 to Office of Enforcement Operations, DOJ, Washington D.C.

Report Prepared By:	Telephone No. <i>(Area Code):</i>
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